

**Montana Nurses Association**

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February 11, 2009

RE : SB 350 - Revise Laws on HIV Testing - Support

Nurses provide HIV testing in many settings in Montana. The process of consent for HIV testing required by the current statute is different than any other infectious disease testing consent process. Probably the toughest thing is not being able to inform a person of a negative test result by telephone or letter. I understand the rationale of this statute, to insure that patients received information about risky behaviors, but in the context of "routine" screening it is burdensome to the provider and the patient. Changing HIV informed consent to the same process required for all other infectious disease testing will expedite care and reduce health care costs.

Nurses are especially pleased with the change to not require consent for testing of a source person in a bloodborne pathogen exposure event when the victim is a first responder. It is very traumatic to suffer an injury while providing care when that injury exposes the victim to blood or other potentially infectious body fluids which could cause AIDS. Testing the source person gives the victim immediate information—usually good news. When the source person cannot be tested then we have to guess about the source person's infectious disease status—the victim worries about developing HIV infection for several months.

We are fortunate to be able to offer post exposure prophylaxis to a victim of an injury when the source person is positive for HIV or the source person can not be tested. These medications are very powerful, very toxic, and very expensive. If we are able to test a negative source person, then the victim will not need to take the medications. If we are not able to test a source person, then a victim must take these toxic expensive medications to prevent the virus from replicating in the victim.

Suggestions:

- 1) This bill only supports testing source without consent for emergency responders. We would ask the committee to consider expanding this protection to healthcare providers, victims of sexual assault or assault with bodily fluids, and good Samaritans who provide emergency care at the scene of a trauma.
- 2) Define prophylaxis for all exposure events, not just mother-to-child.

Section 5. Section 50-16-1003, MCA, is amended to read:

50-16-1003. Definitions. As used in this part, the following definitions apply:

(2) "Antiretroviral prophylaxis" means a specific drug regime preventing ~~mother-to-child~~ transmission of HIV infections.

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SB 350 – Routine HIV Screening

Sponsored by Senator Kim Gillan

Overview:

SB 350 is a bill that would provide for routine HIV screening and incorporate the screening into a patient's general informed consent for medical care. The bill also incorporates prenatal and labor and delivery HIV screening into general informed consent for medical care in an effort to prevent the spread of HIV.

Current Situation:

HIV testing and screening in the state of Montana is currently provided for in statute and requires that a person must specifically seek out HIV diagnostic testing, have pre and post counseling and sign a written consent form.

Change Requested:

In concert with the recommendations from the Centers for Disease Control and Prevention, SB 350 would provide for routine HIV screening and incorporate the screening into a patients' general informed consent for medical care. This bill would allow a patient to "opt-out" of HIV screening and that decision would be documented in the patient's medical chart.

SB 350 Would:

- Remove barriers to HIV testing in a healthcare setting as pre and post-test counseling are sometimes viewed as onerous.
- De-stigmatize HIV testing as eventually, every patient seeking care in a healthcare setting would know his/her HIV status provided that she/he did not opt out of testing.
- Potentially decrease HIV transmission in Montana as it has been proven that people who are not aware of their HIV positive status are more likely to transmit the disease than those who know their HIV status.
- Significantly reduce the chances of HIV transmission to newborns by ensuring that HIV positive mothers received proper treatment and monitoring throughout their pregnancies.

Added Benefits of Routine HIV Screening:

- 25% of people in the United States with HIV do not know that they are infected.
- HIV can be reliably diagnosed prior to symptom development and patients are more likely to be tested if testing is suggested by a medical provider.
- Routine testing helps de-stigmatize the disease.
- Early entry into HIV care increases the likelihood of a longer, healthier life. 39% of people with HIV in the US are not diagnosed until they are in the late stages of the disease.
- Transmission rates are higher in people who do not know they have HIV. People who know their positive HIV status are more likely to engage in risk reduction measures.